

County of San Diego, Planning & Development Services APPLICATION FOR UNREASONABLE HARDSHIP **EXCEPTION TO DISABLED ACCESS REQUIREMENTS**

BUILDING DIVISION

PROJECT ADDRESS:	
OWNER ON APPLICATION:	PHONE NUMBER:
APPLICANT:	PHONE NUMBER:

It is requested that this project be granted an exception to the requirements of 2010 California Building Code (CBC) Chapter 11B, Division IV – Accessibility for Existing Buildings, as specifically noted below.

Up	Section 1134B.2.1 exception: Applies to experformed at this tenant space over the last three as of January 2012). An unreasonable hardship required per CBC 1134B.2.1 to the area of alterations grades shall be dedicated to access features in	Valuation threshold \$136,060.00 (as of January 2012)		
rea	ched or all applicable access features serving a Item (Provide description below)	Does this access feature currently comply with 2010 CBC provisions?	If not, will this access feature be upgraded as part of this permit?	If so, what is the cost of accessibility upgrades? (attach documentation)
1.	Path of travel to entrance			\$
2.	Entrance			\$
3	Path of travel within building to area of alteration			\$
4.	Elevator (if applicable)			\$
5.	Sanitary facilities			\$
6.	Public telephones (if provided)			\$
7.	Drinking fountains (if provided)			\$
8.	Parking, alarms, other (specify)			\$
		Total cost of up	ograded access feature(s) = A	\$
	Total cost of this project and all other work pe	erformed over the last three y	vears in this tenant space = B*	\$
	Additional project cost dedicate	d to access feature upgrades	s (minimum 20%): (A+B) x 100	%
	scription of access features to be upgrade	ed/provided:		
		re in this tonant enaco*:		
Alt	erations performed over the last three yea	is in this tenant space.		

PDS 644 REV.: 09/24/2012

Exceptions requested	Exceptions requested Co			Code section/exception		Cost of accessibility upgrades (attach documentation)		
					\$			
					\$			
					\$			
			Total \$_		\$	\$		
Description:								
he upgraded access fe	eatures will incre	ease the co	est of construction by _					
rchitect/designer	IDUALS PROV	IDED INFO	ORMATION LISTED A	Owner/tenant	.			
address				Address				
City	State	Zip code	;	City	State	Zip code)	
ignature (required)			Date	Signature (required)			Date	
DR JURISDICTION US Date received	E ONLY			Received by				
indings and decisions o	of the enforcing	official:						
☐ Request granted	·.							
	rdship exceptior			Section 1134B.2.1 of 201	0 CBC. Access	features li	isted in Part A of thi	
Unreasonable har form shall be prov	rdship exception vided as part of the n(s) request is a	this permit.	ased on Section(s)	Section 1134B.2.1 of 201				
Unreasonable har form shall be prov Specific exceptior features shall be p	rdship exception vided as part of n(s) request is a provided as spe red. This decision	this permit. pproved bacified in Tit on must be	ased on Section(s) tle 24. ratified by the Board of			_ of 2010 (CBC. All other acce	
Unreasonable har form shall be prov Specific exceptior features shall be p Ratification requir fee paid before th Request denied.	rdship exception vided as part of n(s) request is a provided as spe red. This decision e board can hea	pproved bacified in Tit on must be ar the reque	ased on Section(s) tle 24. ratified by the Board o est. determination, you may		An application	of 2010 (CBC. All other acce	